

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.

Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Jeanine A. Tellin for Supervisor

IMPORTANT: Indicate by # type of committee you are reporting for: 5

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Jeanine Tellin

Political Party (if applicable)

Republican

Office Sought

County Supervisor

District (if Senate or House)

FORM

DR-2

(Rev. 12/2009)

DISCLOSURE
REPORT

For Office Use Only

Comm. # _____

Logged In _____

Scanned _____

Computer _____

Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

Jeanine A. Tellin

SIGNATURE OF PERSON FILING REPORT

563-637-2774

TELEPHONE

7/15/10

DATE SIGNED

I AM FILING A October 19, 2010 REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

Fayette

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)

\$ 391.33

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

3675.70

Schedule F: Loans Received total (Attach Schedule F)

-0-

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

-0-

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 4067.03

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

2542.20

Schedule F: Loan Repayments total (Attach Schedule F)

-0-

CASH ON HAND at the end of this reporting period (if final report balance must be zero)

\$ 1524.83

**UNPAID BILLS (From Schedule D - Attach Schedule D)

-0-

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

-0-

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

1500.00

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO ☐

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ -0-

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jeanine A. Tellin for Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/28/10	ID# CK#	unitemized contribution		\$ 20.00	<input type="checkbox"/>
7/30/10	ID# CK#	Don Bunn 12562 80th street Maynard, IA 50655		50.00	<input type="checkbox"/>
8/9/10	ID# CK#	Don Keyh 21553 130th street Sumner, IA 50674		25.00	<input type="checkbox"/>
8/10/10	ID# CK#	Jeanette Wolfgram 12274 R. Avenue Westgate, IA 50681		200.00	<input type="checkbox"/>
8/12/10	ID# CK#	Sandy Salmon 9711 Streeter Rd. Janesville, IA 50647		50.00	<input type="checkbox"/>
8/17/10	ID# CK#	AF Farms LTD - Alan Albrecht 9831 P Avenue Maynard, IA 50655-7602		100.00	<input type="checkbox"/>
8/19/10	ID# CK#	Irene Fben 913 and Avenue Southwest Delwein, Iowa 50662		25.00	<input type="checkbox"/>
9/2/10	ID# CK#	Roger Michael 601 Russell Avenue West Union, Iowa 52175		20.00	<input type="checkbox"/>
9/3/10	ID# CK#	David Balk 24886 306th street Waucoma, Iowa 52171		20.00	<input type="checkbox"/>
9/3/10	ID# CK#	Lester Steffens 307 Hall Street West Union, Iowa 52175		10.00	<input type="checkbox"/>
SUB-TOTAL				\$ 520.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Deanne A. Tellin for Supervisor

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9/3/10	ID# CK#	Jon Mitchell 1326 Admission Road Arlington, Iowa 50606		\$ 75.00	<input type="checkbox"/>
9/3/10	ID# CK#	Sharon Wedo 1107 Main Street Elgin, Iowa 52141		50.00	<input type="checkbox"/>
9/3/10	ID# CK#	Lennora Sternbrunn 16271 50th Street Delwein, Iowa 50662-9456		50.00	<input type="checkbox"/>
9/3/10	ID# CK#	Jon Harrison PO. Box 155, 165 7th St. North Maynard, Iowa 50655-0155		50.00	<input type="checkbox"/>
9/3/10	ID# CK#	Sandra Arthur 19151 160th Street Sumner, Iowa 50674		50.00	<input type="checkbox"/>
9/3/10	ID# CK#	George H. Malven 8695 Q Avenue Maynard, Iowa 50655-7614		50.00	<input type="checkbox"/>
9/3/10	ID# CK#	Robert McMillian 29121 30th Street Stanley, Iowa 50671		50.00	<input type="checkbox"/>
9/4/10	ID# CK#	James Burrack 8124 80th Street Arlington, Iowa 50606		15.00	<input type="checkbox"/>
9/4/10	ID# CK#	Gerald J. Lynch 331- 3rd Street Northwest Waucoma, Iowa 52171		100.00	<input type="checkbox"/>
9/4/10	ID# CK#	Nancy S. Wendel 16784 50th Street Delwein, Iowa 50662		30.00	<input type="checkbox"/>
SUB-TOTAL				\$520.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jeanine A. Tellin for Supervisor

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9/4/10	ID# CK#	Tim Recker - Farm Account 5604 H Avenue Arlington, Iowa 50606		\$ 50.00	<input type="checkbox"/>
9/4/10	ID# CK#	Eugene Sick 10246 R. Avenue Maynard, Iowa 50655		15.00	<input type="checkbox"/>
9/7/10	ID# CK#	Mrs. Robert Eldridge 530 1st Street North Maynard, IA 50655		30.00	<input type="checkbox"/>
9/8/10	ID# CK#	Margaret Lalk 20928 S Avenue Hawkeye, IA 54147		10.00	<input type="checkbox"/>
9/8/10	ID# CK#	Peggy J. Schlatter 22485 20th Street Hawkeye, IA 54147		20.00	<input type="checkbox"/>
9/8/10	ID# CK#	Kenneth L. Vagts 28824 State Street Eldorado, IA 52175		50.00	<input type="checkbox"/>
9/8/10	ID# CK#	Diann Kerns 5542 Unicorn Road Delwein, IA 50662		20.00	<input type="checkbox"/>
9/8/10	ID# CK#	Joe Bahe 9804 20th Street Stanley, IA 50671		10.00	<input type="checkbox"/>
9/8/10	ID# CK#	Gwennith Vandervee 106 8th Avenue Northeast Delwein, IA 50662		10.00	<input type="checkbox"/>
9/8/10	ID# CK#	C.J. (Clair) Lensing 17525 25th Street Delwein, IA 50662		50.00	<input type="checkbox"/>
SUB-TOTAL				\$265.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jeanine A. Tellin for Supervisor

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9/8/10	ID# CK#	Robert Kalb 3463 H Avenue AURORA, IA 50607		\$ 100.00	<input type="checkbox"/>
9/9/10	ID# CK#	James Ingels (Farm Act.) 12627 M. Avenue Fayette, IA 52142		20.00	<input type="checkbox"/>
9/9/10	ID# CK#	Francis Thyer 13578 170th Street Randalia, IA 52164		100.00	<input type="checkbox"/>
9/9/10	ID# CK#	Kent and Shelia Remking 80983 60th Street Oelwein, IA 50662		50.00	<input type="checkbox"/>
9/10/10	ID# CK#	Robert L. Pepin 3918 Outer Road Oelwein, IA 50662		20.00	<input type="checkbox"/>
9/10/10	ID# CK#	Kathy Cole 6568 K Avenue Fayette, IA 52142		100.00	<input type="checkbox"/>
9/10/10	ID# CK#	Timothy Sexton 119 North Carpenter Sumner, IA 50674		50.00	<input type="checkbox"/>
9/10/10	ID# CK#	Jackie Ruff 20827 90th Street Westgate, IA 50681		50.00	<input type="checkbox"/>
9/10/10	ID# CK#	Perry J. Comeau 113 Hillside Drive Oelwein, IA 50662		200.00	<input type="checkbox"/>
9/11/10	ID# CK#	Donna Bachman 21254 60th Street Oelwein, IA 50662		10.00	<input type="checkbox"/>
SUB-TOTAL				\$ 700.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jeannie A. Tellin for Supervisor

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9/11/10	ID# CK#	Lois R. Miller 405 Clay Street Clermont, IA 52135		\$ 20.00	<input type="checkbox"/>
9/11/10	ID# CK#	Nancy R. Grimes 7442 Filmore Road West Union, IA 52175		50.00	<input type="checkbox"/>
9/11/10	ID# CK#	Beverly L. Lehn 13348 170th Street Randalia, IA 52164		50.00	<input type="checkbox"/>
9/11/10	ID# CK#	Albert E. Gathman 12797 35th Street Oelwein, IA 50662		50.00	<input type="checkbox"/>
9/13/10	ID# CK#	Joy Eischeid 306 Auburn Street West Union, IA 52175		20.00	<input type="checkbox"/>
9/13/10	ID# CK#	Larry W. Reed 271 Oak Ridge Drive Clermont, IA 52135		20.00	<input type="checkbox"/>
9/14/10	ID# CK#	Kent Appler 4367 Eagle Road Clermont, IA 52135		100.00	<input type="checkbox"/>
9/14/10	ID# CK#	Merna Custer 205 North 1st. Street Randalia, IA 52164		50.00	<input type="checkbox"/>
9/14/10	ID# CK#	Wilda M. Ingamells 1228 J Avenue Stapley, IA 50671		20.00	<input type="checkbox"/>
9/14/10	ID# CK#	Richard J. Hofmeyer 400 Mechanic Street Fayette, IA 52142		20.00	<input type="checkbox"/>
SUB-TOTAL				\$400.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jeannine A. Tellin for Supervisor

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9/14/10	ID# CK#	Dale Schrader 15757 110th Street Maynard, IA 50655		\$ 20.00	<input type="checkbox"/>
9/14/10	ID# CK#	Janita A. Lottus 8384 Harding Rd. West Union, IA 52175		15.00	<input type="checkbox"/>
9/15/10	ID# CK#	Mrs. Urban (Pat) Berkes 7957 K Avenue Fayette, IA 52142		20.00	<input type="checkbox"/>
9/16/10	ID# CK#	Loyle Bunn 11702 U Avenue Westgate, IA 50681		50.00	<input type="checkbox"/>
9/16/10	ID# CK#	Lois Dummermuth 3587 Diamond Road Elgin, IA 52141		50.00	<input type="checkbox"/>
9/17/10	ID# CK#	Patricia A. Burghardt 15779 T. Avenue Sumner, IA 50674		20.00	<input type="checkbox"/>
9/17/10	ID# CK#	Mrs. Esther Grimm 101 3rd Street Southwest #102 Oelwein, IA 50662		20.00	<input type="checkbox"/>
9/18/10	ID# CK#	Wallace A. Rundle 107 12th Avenue Southeast Oelwein, IA 50662		20.00	<input type="checkbox"/>
9/18/10	ID# CK#	Jeannie K. Kalb 4875 I Avenue Stanley, IA 50671		50.00	<input type="checkbox"/>
9/18/10	ID# CK#	Alan Gunderson 29507 Harding Road Postville, IA 52162		20.00	<input type="checkbox"/>

SUB-TOTAL

TOTAL (if last page of this schedule)

\$285.00

\$

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For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

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9/20/10	ID# CK#	Lora L. Saunders 10-10th Avenue Northwest Oelwein, IA 50662		\$ 10.00	<input type="checkbox"/>
9/21/10	ID# CK#	Alice T. Koempel 103 Lincoln Drive West Union, IA 52175		50.00	<input type="checkbox"/>
9/21/10	ID# CK#	Herman Gadow 111 10th Street Southwest Oelwein, IA 50662		10.00	<input type="checkbox"/>
9/21/10	ID# CK#	Dorline Allbee 403 East Plum West Union, IA 52175		10.00	<input type="checkbox"/>
9/21/10	ID# CK#	James B. Grimm (Farm Acct.) 10316 N Avenue Maynard, IA 50655		100.00	<input type="checkbox"/>
9/22/10	ID# CK#	Merl McFarlane 110 4th Street Northwest Oelwein, IA 50662		25.00	<input type="checkbox"/>
9/22/10	ID# CK#	David Hurd 941 1st Avenue Northeast Oelwein, IA 50662		10.00	<input type="checkbox"/>
9/22/10	ID# CK#	Cheryl Arthur 18286 170th Street Sumner, IA 50674		50.00	<input type="checkbox"/>
9/23/10	ID# CK#	Davis Buddenburg 403 West Water St. Fayette, IA 52142		20.00	<input type="checkbox"/>
9/23/10	ID# CK#	Lawrence Hurd 225 Cass Street, P.O. Box 70 Westgate, IA 50681		20.00	<input type="checkbox"/>
SUB-TOTAL				\$305.00	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

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9/23/10	ID# CK#	Thomas Rich 211 Sandy Lane, P.O. Box 237 Clermont, IA 52135		\$ 20.00	<input type="checkbox"/>
9/25/10	ID# CK#	Brian Suckow 105 South East Line Road Delwein, IA 50662		20.00	<input type="checkbox"/>
9/25/10	ID# CK#	Jeff Moellers 7826 E Avenue Arlington, IA 50606		30.00	<input type="checkbox"/>
9/27/10	ID# CK#	Jim Buhr 19948 100th Street Westgate, IA 50681		30.00	<input type="checkbox"/>
9/28/10	ID# CK#	Diane Buhr 17206 140th Street Sumner, IA 50674		20.00	<input type="checkbox"/>
9/28/10	ID# CK#	Kewyn Schrader 12546 Neon Road Maynard, IA 50655		20.00	<input type="checkbox"/>
9/28/10	ID# CK#	Jolynn Schrader 15757 110th Street Maynard, IA 50655		20.00	<input type="checkbox"/>
9/28/10	ID# CK#	unitemized contribution		10.00	<input type="checkbox"/>
9/26/10	ID# CK#	Maynard Savings Bank P.O. Box 158 Maynard, IA 50655		.70	<input type="checkbox"/>
9/29/10	ID# CK#	Carol Kenneh 6794 R Avenue Delwein, IA 50662		20.00	<input type="checkbox"/>

SUB-TOTAL

\$190.70

TOTAL (if last page of this schedule)

\$

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Leanne A. Tellin for Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
9/29/10	ID# CK#	Audrey Vagts 102 Lincoln Way West Union, IA 52175		\$ 20.00	<input type="checkbox"/>
9/30/10	ID# CK#	Jason Moellers 26904 L Avenue West Union, IA 52175		50.00	<input type="checkbox"/>
10/1/10	ID# CK#	Beverly M. Hinsenbrock 28511 Beechnut Road Clement, IA 50135		20.00	<input type="checkbox"/>
10/2/10	ID# CK#	Roland Waterman 603 Mill Street Elgin, IA 50141		20.00	<input type="checkbox"/>
10/5/10	ID# CK#	Laura M. Janssen 10299 G. Avenue Arlington, IA 50606		50.00	<input type="checkbox"/>
10/5/10	ID# CK#	Emery Hillman 100-8th Avenue Northeast Delwein, IA 50662		25.00	<input type="checkbox"/>
10/5/10	ID# CK#	Gerald Delagardelle 18004 V Avenue Hawkeye, IA 52147		30.00	<input type="checkbox"/>
10/5/10	ID# CK#	John W. Orr 16558 Jade Road Fayette, IA 52142		20.00	<input type="checkbox"/>
10/7/10	ID# CK#	unitemized contribution		20.00	<input type="checkbox"/>
10/7/10	ID# CK#	Ronald Seedorff 3205 40th Street Arlington, IA 50606		20.00	<input type="checkbox"/>

SUB-TOTAL

\$275.00

TOTAL (If last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

**MONETARY
RECEIPTS**

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Jeanine A. Tellin for Supervisor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10/9/10	ID# CK#	Kay Bunn 6262 N Avenue Maynard, IA 50656		\$ 20.00	<input type="checkbox"/>
10/12/10	ID# CK#	Ruth Goldenstein 5673 30th Street Aurora, IA 50607		10.00	<input type="checkbox"/>
10/12/10	ID# CK#	Luella M. McClain 22568 110th Street Westgate, IA 50681		20.00	<input type="checkbox"/>
10/12/10	ID# CK#	Fayette Co. Republican Central Committee Clermont, IA 52135		100.00	<input type="checkbox"/>
10/13/10	ID# CK#	Beverly Puls 19496 110th Street Westgate, IA 50681		25.00	<input type="checkbox"/>
10/13/10	ID# CK#	Debrah Kalk 23858 110th St. Westgate, IA 50681		40.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 215.00

TOTAL (if last page of this schedule)

\$ 3675.70

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jeanine A. Tellin for Supervisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/3/10	ID# CK# 1010	VOIDED		\$ —
9/3/10	ID# CK# 1011	Bel Incorporated 6905 NW 25th Street Miami, FL 33122	Koozies	357.99
8/16/10	ID# CK# 1012	Jeanine Tellin 18534 100th Street Maynard, IA 50655	Reimburse for envelopes / ink cart.	158.05
8/30/10	ID# CK# 1013	Jeanine Tellin 18534 100th Street Maynard, IA 50655	Reimburse for Stamps	140.80
9/3/10	ID# CK# 1014	Postmaster 255 main Street Maynard, IA 50655	Stamps	140.80
9/7/10	ID# CK# 1015	Postmaster 255 main Street Maynard, IA 50655	Stamps	140.80
9/10/10	ID# CK# 1016	USPS 255 Main Street Maynard, IA 50655	Stamps	264.00
9/14/10	ID# CK# 1017	Postmaster 255 main Street Maynard, IA 50655	Stamps	264.00
SUB-TOTAL				\$ 1466.44
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Jeannine A. Tellin for Supervisor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
9/14/10	ID# CK# 1018	Jeannine Tellin 18534 100th Street Maynard, IA 50655	Reimburse for paper, envelopes ink cart.	\$ 349.71
9/21/10	ID# CK# 1019	Postmaster 255 Main Street Maynard, IA 50655	Stamps	264.00
9/26/10	ID# CK# AW	Maynard Savings Bank P.O. Box 158 Maynard, IA 50655	Maintenance fee	5.00
9/26/10	ID# CK# AW	Maynard Savings Bank P.O. Box 158 Maynard, IA 50655	Check charge	.70
9/26/10	ID# CK# AW	Maynard Savings Bank P.O. Box 158 Maynard, IA 50655	Sales tax on charges	.35
10/4/10	ID# CK# 1020	Oelwein Register 25-1st Street Southeast Oelwein, IA 50662	Political Ad elections	225.00
10/4/10	ID# CK# 1021	Fayette County Union P.O. Box 153 119 South Vine West Union, IA 52175	Political Ad elections	122.25
10/4/10	ID# CK# 1022	Newspapers of Fayette Co. 227 Center Street Elgin, IA 52141	Political Ad elections	108.75
SUB-TOTAL				\$ 1075.76
TOTAL (if last page of this schedule)				\$ 2542.20

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

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SCHEDULE

F

(Rev. 02/08)

LOANS
RECEIVED
& REPAYED

☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Jeanine A. Tellia for Supervisor

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 1500.00

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable*)	AMOUNT OF LOAN
			\$

TOTAL (PART I) \$

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, If Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II) \$

From Schedule E - TOTAL LOANS FORGIVEN \$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD \$ 1500.00

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(for Schedule F)